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Warrior Transition Units in USAREUR

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What is a Warrior in Transition (WT)?

A warrior in transition (WT) is a Soldier:

- **assigned to a Medical Hold (MH) company,**
- **assigned to a Medical Holdover (MHO) company,**
- **in Active Duty Medical Extension (ADME) status,**
- **going through a Medical Evaluation Board (MEB),**
- **requiring complex medical care for > six months.**

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USAREUR's WT Population

- **No MH, MHO, or ADME Soldiers in USAREUR**
- **7ARCOM may be a source of MHO or ADME Soldiers.**
- **At present, Soldiers undergoing MEBs make up the WT population**
  - **WTU (Landstuhl) = 87**
  - **WTU (Bavaria) = 57**
  - **WTU (Heidelberg) = 68**

  USAREUR Total = 212

Assignment is based on decision by parent unit

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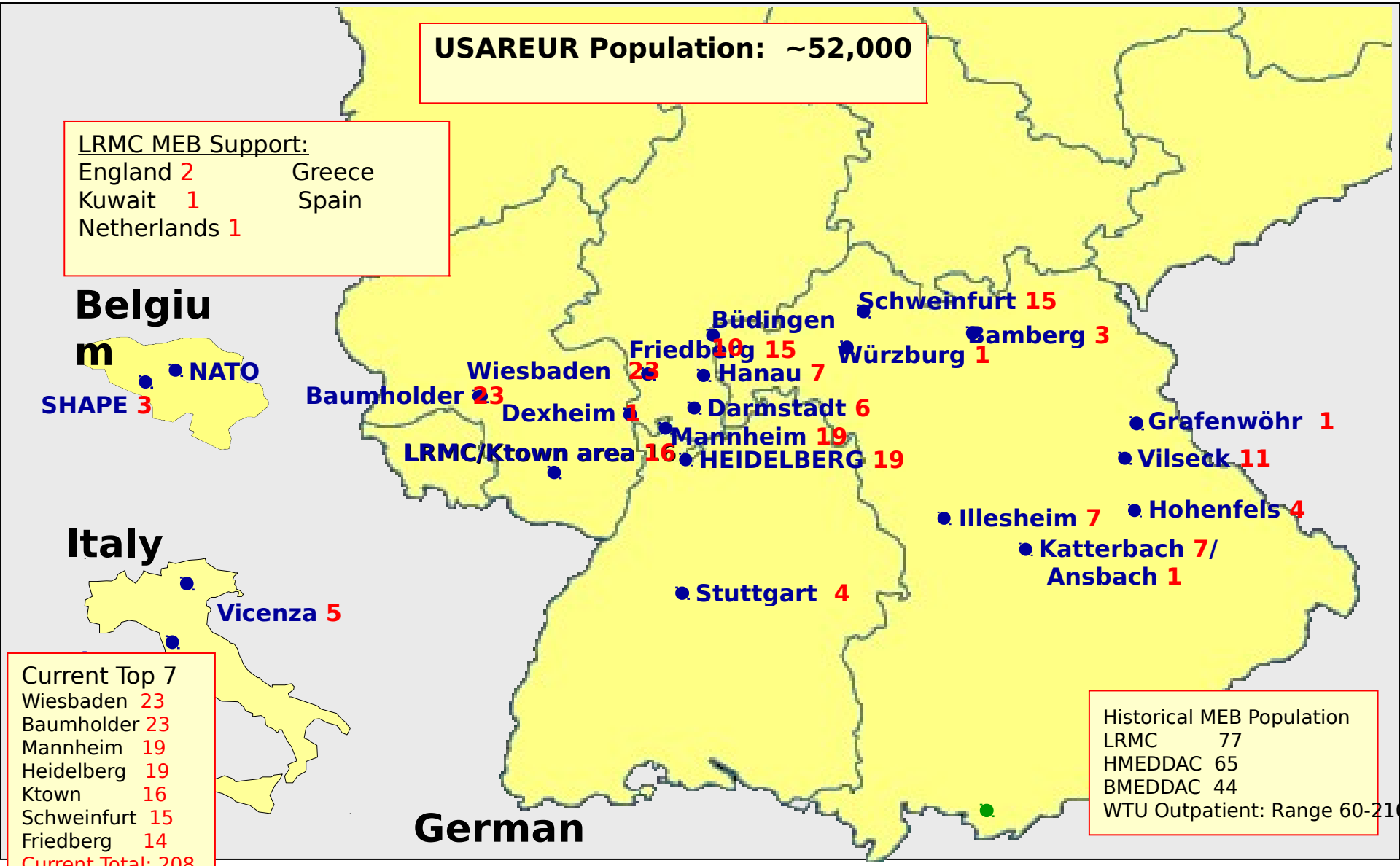
ERMC MEB Population



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WTUs in USAREUR

- WTU (Landstuhl)
- WTU (Bavaria)
- WTU (Heidelberg)
- WTU (Outpatient)

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WTU Vision and Mission

- **Vision:**
  - **Develop an effective organization that takes care of Wounded Warriors so they can focus on their mission to heal.**
- **Mission:**
  - **Provide Command and Control, primary care, and case management for Warriors in Transition to establish the conditions for their healing and to promote their timely return to the force or transition to civilian life.**

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WTU Concept of Operation

Landstuhl, Heidelberg, Bavaria:

- Soldier's mission is to heal / complete MEB
- Soldier stays at home station
- Soldier works at clinic or in a community agency
- WTU CDR and 1SG are regionally based
- WTU PSG and SL are locally based

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Concept of Operation for WTU (Outpatient)

- **Formerly the Medical Transient Detachment at Kleber Kaserne.**
- **Provides C2, transportation, clothing, and MWR support to short-term (< 14 days) deployed outpatients from OIF, OEF, and CENTCOM AOR**
- **Case management by LRMC's Deployed Warrior Medical Management Center (DWMMC)**
- **Care provided by DWMMC and LRMC staff**
- **Provides quality care and returns warriors to deployed unit**

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WTU Staffing Template

- Combat Arms Co Cdr
- 11Z5M 1SG
- 11B40 Platoon SGT per 36 Soldiers
- 11B30 Squad Leader per 12 Soldiers
- Nurse case manager per 18 Soldiers
- Primary care manager per 200 Soldiers
- MEB physician per 200 Soldiers
- A 68W20 medical NCO
- other civilian healthcare and administrative staff

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WTU Cadre

- **Combat Veterans taking care of wounded warriors**
  - **Experienced Commanders, 1SGs, PSG, SL**
  - **Administration Support (medical admin, personnel, finance**
  - **Ombudsman (patient advocated dedicated to WTU Soldier concerns)**
- **WTU Cadre built around TRIAD:**
  - **Primary Care Manager**
  - **Nurse Case Manager**
  - **Squad Leader**
- **Additional Medical Support**
  - **Occupational Therapy, Physical Therapy, Social Work, etc.**
  - **Chaplain**

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WTU Leadership

- **WTU LRMC**
  - **Cdr, 1SG: LRMC**
  - **PSG: Baumholder, Wiesbaden**
  - **SL: Baumholder, Wiesbaden, LRMC, Vicenza, Shape**
- **WTU HMEDDAC**
  - **CDR, 1SG: Heidelberg**
  - **PSG: Heidelberg, Mannheim**
  - **SL: Heidelberg, Mannheim, Darmstadt, Hanau, Stuttgart**
- **WTU Bavaria**
  - **CDR, 1SG: Vilseck**
  - **PSG: Vilseck**
  - **SL: Schweinfurt, Vilseck, Bamberg, Katterbach**
    - **Vilseck SL covering Grafenwoehr, Hohenfels**
    - **Katterbach SL covering Illesheim, Ansbach**

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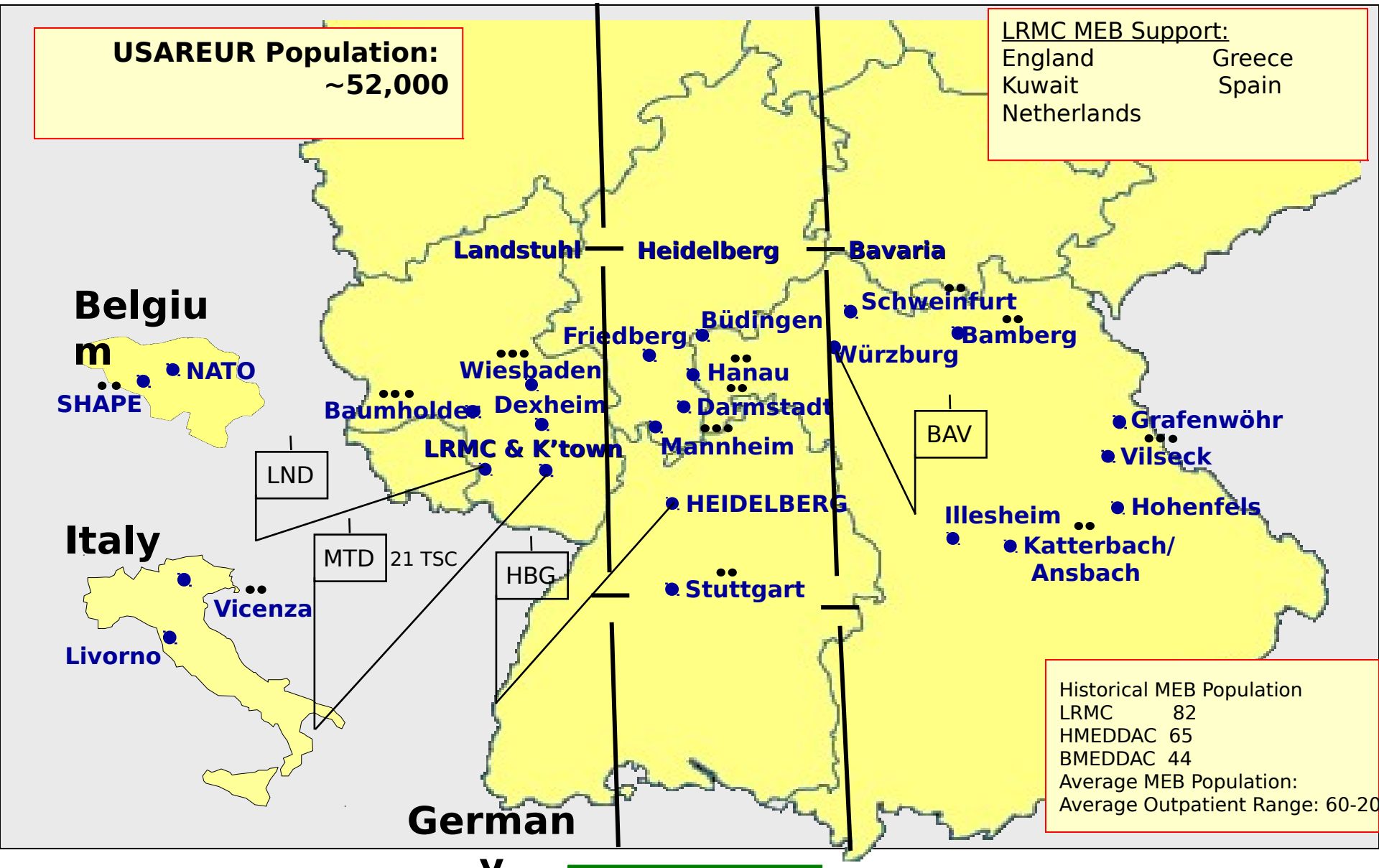
ERMC WTU Footprint



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WTU Eligibility Criteria (1 of 2)

- SM receiving a MEB
- SM requiring complex care > 6 months
  - Duty limitations preclude from contributing to unit mission
  - Majority of SM time spent receiving medical care

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Ineligibility Criteria

- **Soldiers NOT eligible for WTU:**
  - **SM Pending investigation, UCMJ, administrative separations**
  - **Normal, uncomplicated pregnancy**
  - **SM with permanent profiles requiring MMRB**

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Assignment of MEB and complex cases

Soldiers going through an MEB or who require complex medical care for longer than six months may be assigned to the WTU at the discretion of the parent unit commander. This is done in coordination with the MTF commander.

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Assigning Soldiers to the WTU (1 of 3 pages)

1. PEBLO informs Unit CDR of SM MEB and eligibility for WTU
   OR Unit CDR identifies eligible Soldiers with complex care needs
2. Unit Commander prepares 3 documents to request reassignment
   a. DA 4187, per ALARACT message, 0-6 signature on 4187
   b. Letter requesting reassignment and certification letter
      1) Provides justification for reassignment, profile injury and previous rehabilitative measures
      2) Verifies Soldier is cleared of any UCMJ, legal actions, finance
   c. DA 5889-R MEB Document Checklist
      1) Administrative requirements for all Soldiers going through MEB
      2) Not required for Soldiers not going through MEB

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Assigning Soldiers to the WTU (2 of 3pages)

4. Unit CDR emails requirements to WTU in their footprint
   a. WTU.Heidelberg@amedd.army.mil
   b. WTU.Landstuhl@amedd.army.mil
   c. WTU.Bavaria@amedd.army.mil
5. WTU CDR coordinates with MTF CDR, PCM and NCM
   a. Determines eligibility/ability to accept Soldier into WTU
6. MTF notifies unit of approval/disapproval of transfer to WTU
   a. Approval: WTU assigns Soldier a Primary Care Manager, Case Manager, and Squad Leader; care plan developed
   b. Disapproval: Unit CDR ensures Soldier makes all medical appointments

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Assigning Soldiers to the WTU (3 of 3 pages)

6. Soldier out-processes unit and in-processes WTU
7. MTF prepares orders reassigning to WTU
8. Soldier completes care; returns to duty or transitions to civilian life

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USAREUR Soldiers injured in OIF/OEF

- Soldier evacuated to Landstuhl Regional Medical Center
  - LRMC care team develops treatment plan
  - LRMC determines need for CONUS evacuation or ability to remain in theater
- Evacuated to CONUS
  - Assigned to WTU in CONUS
  - Evacuation location based on availability of care and Soldiers preferences
- Remains in Europe
  - Assigned to WTU in Europe as applicable

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WTU MTF POCs

- **WTU:**
  - **LRMC: WTU.Landstuhl@amedd.army.mil**
  - **Heidelberg MEDDAC: WTU.Heidelberg@amedd.army.mil**
  - **Bavaria MEDDAC: WTU.Bavaria@amedd.army.mil**
- **MEB POCs (MTF PEBLOs):**
  - **LRMC: 486-8224**
  - **HMEDDAC: 371-2367**
  - **BMEDDAC: 476-2533**

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ERMC WTU POCs

ERMC Patient Administration

371-3383

371-2529

371-2380

371-2897